



PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

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**TRANSMITTAL  
FORM**

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Total Number of Pages in This Submission

Application Number	09/687,045
Filing Date	10/13/2000
First Named Inventor	Ram Krishna Rastogi, Deceased
Art Unit	1761
Examiner Name	Paden, C.A.
Attorney Docket Number	RAR00P

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> <b>Issue</b> <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Declaration & Power of Attorney for Legal Representative Intervening on Behalf of Deceased Inventor.
<b>Remarks</b> Bal Krishna Rastogi is intervening on behalf of his father, Ram Krishna Rastog, now deceased.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Thomas P. O'Connell, Esq.
Signature	
Date	01/15/2004

**CERTIFICATE OF TRANSMISSION/MAILING**

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Typed or printed name	Thomas P. O'Connell		
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